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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	ZAO0101PUSA
		Application Number	
Title of Invention	SUIT FOR FORCEDLY MODIFYING A HUMAN POSTURE AND PRODUCING AN INCREASED LOAD ON A LOCOMOTION APPARATUS		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

Applicant Information:

Applicant 1					Remove
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name		Suffix
	Anatoly	Ivanovich	Grigoriev		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Moscow	Country Of Residenceⁱ	RU		
Citizenship under 37 CFR 1.41(b)ⁱ		RU			
Mailing Address of Applicant:					
Address 1		ul. Aleksandra Nevskogo, 1-47			
Address 2					
City	Moscow	State/Province			
Postal Code	125047	Countryⁱ	RU		
Applicant 2					Remove
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name		Suffix
	Inesa	Benediktovna	Kozlovskaya		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Moscow	Country Of Residenceⁱ	RU		
Citizenship under 37 CFR 1.41(b)ⁱ		RU			
Mailing Address of Applicant:					
Address 1		ul. Dolgorukovskaya, 5-287			
Address 2					
City	Moscow	State/Province			
Postal Code	103006	Countryⁱ	RU		
Applicant 3					Remove
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	<input type="radio"/> Party of Interest under 35 U.S.C. 118
Prefix	Given Name	Middle Name	Family Name		Suffix
	Evgeniy	Petrovich	Tihomirov		
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Moscow	Country Of Residenceⁱ	RU		

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Citizenship under 37 CFR 1.41(b) i		RU	
Mailing Address of Applicant:			
Address 1		Nagatinskaya nab., 40-634	
Address 2			
City	Moscow	State/Province	
Postal Code	140070	Countryⁱ	RU
Applicant 4			Remove
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	Elena	Illarionovna	Sorokina
Residence Information (Select One) <input type="radio"/> US Residency <input checked="" type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Moskovskaya obl.	Country Of Residenceⁱ	RU
Citizenship under 37 CFR 1.41(b) i		RU	
Mailing Address of Applicant:			
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Address 2			
City	Moskovskaya obl.	State/Province	
Postal Code	140104	Countryⁱ	RU
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button.			Add

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).			
<input type="checkbox"/> An Address is being provided for the correspondence Information of this application.			
Customer Number	22045		
Email Address		Add Email	Remove Email

Application Information:

Title of the Invention	SUIT FOR FORCEDLY MODIFYING A HUMAN POSTURE AND PRODUCING AN INCREASED LOAD ON A LOCOMOTION APPARATUS		
Attorney Docket Number	ZAO0101PUSA	Small Entity Status Claimed	<input checked="" type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)		Suggested Figure for Publication (if any)	

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Publication Information:
☐ Request Early Publication (Fee required at time of Request 37 CFR 1.219)

☐ Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not been and will not be the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing.
Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.

Please Select One: ☒ Customer Number ☐ US Patent Practitioner ☐ US Representative (37 CFR 11.9)

Customer Number 22045

Domestic Priority Information:

This section allows for the applicant to claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c). Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.

Prior Application Status

Remove

Application Number

Continuity Type

Prior Application Number

Filing Date (YYYY-MM-DD)

Additional Domestic Priority Data may be generated within this form by selecting the **Add** button.

Add

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).

Remove

Application Number

Country ⁱ

Parent Filing Date (YYYY-MM-DD)

Priority Claimed

☐ Yes ☒ No

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Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.

Assignee 1

Remove

If the Assignee is an Organization check here.



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Organization Name	STATE SCIENTIFIC CENTER OF RUSSIAN FEDERATION-INSTITUTE OF BIO-MEDICAL PROBLEMS		
Mailing Address Information:			
Address 1	Khoroshevskoe Shosse, 76-A		
Address 2			
City	Moscow	State/Province	
Country	RU	Postal Code	123007
Phone Number		Fax Number	
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button.			
			Add

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/John E. Nemazi/			Date (YYYY-MM-DD)	2006-08-22
First Name	John	Last Name	Nemazi	Registration Number	30876

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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The information provided by you in this form will be subject to the following routine uses:

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2. A record from this system of records may be disclosed, as a routine use, in the course of presenting evidence to a court, magistrate, or administrative tribunal, including disclosures to opposing counsel in the course of settlement negotiations.
3. A record in this system of records may be disclosed, as a routine use, to a Member of Congress submitting a request involving an individual, to whom the record pertains, when the individual has requested assistance from the Member with respect to the subject matter of the record.
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7. A record from this system of records may be disclosed, as a routine use, to the Administrator, General Services, or his/her designee, during an inspection of records conducted by GSA as part of that agency's responsibility to recommend improvements in records management practices and programs, under authority of 44 U.S.C. 2904 and 2906. Such disclosure shall be made in accordance with the GSA regulations governing inspection of records for this purpose, and any other relevant (i.e., GSA or Commerce) directive. Such disclosure shall not be used to make determinations about individuals.
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